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PTO/SB/21 (09-04)

Approved for use through 7/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	<b>09/913,362</b>
	Filing Date	<b>May 1, 2002</b>
	First Named Inventor	<b>Yasunori MATSUKAWA, et al.</b>
	Art Unit	<b>2862</b>
	Examiner Name	<b>Jay M. Patidar</b>
	Attorney Docket No.	<b>MAT-8172US</b>
Total Number of Pages in This Submission <b>13</b>		

<b>ENCLOSURES (Check all that apply)</b>		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Credit Card Payment Form Attached  <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____  <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC ( <b>Appeal Notice, Brief, Reply Brief</b> ) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  <p style="text-align: right;">➤ <b>Return postcard</b></p>
Remarks:		

**SIGNATURE OF APPLICANT, ATTORNEY OR AGENT**

Firm Name	<b>RatnerPrestia</b>		
Signature			
Printed Name	<b>Lawrence E. Ashery</b>		
Date	<b>February 23, 2005</b>	Reg. No.	<b>34,515</b>

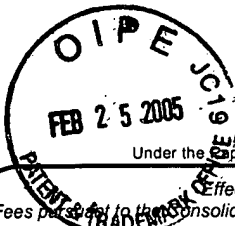
**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or Printed Name	<b>Fran Petrillo</b>	Date	<b>February 23, 2005</b>

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, ALEXANDRIA, VA 22313-1450.**

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# FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

Complete if Known	
Application Number	09/913,362
Filing Date	May 1, 2002
First Named Inventor	Yasunori MATSUKAWA, et al.
Examiner Name	Jay M. Patidar
Art Unit	2862
Attorney Docket No.	MAT-8172US

TOTAL AMOUNT OF PAYMENT (\$) **400.00**

### METHOD OF PAYMENT (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_

Deposit Account Deposit Account Number: 18-0350 Deposit Account Name: RatnerPrestia

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- Charge fee(s) indicated below  Charge fee(s) indicated below, **except for the filing fee**  
 Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17  Credit any overpayments

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### FEE CALCULATION

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity Fee (\$)	Small Entity Fee (\$)	Small Entity Fee (\$)	Small Entity Fee (\$)	Small Entity Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	—
Design	200	100	100	50	130	65	—
Plant	200	100	300	150	160	80	—
Reissue	300	150	500	250	600	300	—
Provisional	200	100	0	0	0	0	—

#### 2. EXCESS CLAIM FEES

Fee Description	Small Entity	
	Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims: 35 - 20 or HP = 15 Extra Claims Fee (\$): 0 Fee Paid (\$): 0 Multiple Dependent Claims Fee (\$): 0 Fee Paid (\$): 0

HP = highest number of total claims paid for, if greater than 20

Indep. Claims: 5 - 3 or HP = 2 Extra Claims Fee (\$): 400.00 Fee Paid (\$): 400.00

HP = highest number of independent claims paid for, if greater than 3

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets: \_\_\_\_\_ - 100 = \_\_\_\_\_ Extra Sheets: \_\_\_\_\_ / 50 = \_\_\_\_\_ (round up to a whole number) Number of each additional 50 or fraction thereof: \_\_\_\_\_ Fee (\$): \_\_\_\_\_ Fee Paid (\$): \_\_\_\_\_

#### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): \_\_\_\_\_

Fees Paid (\$)

SUBMITTED BY: \_\_\_\_\_ Complete (if applicable)

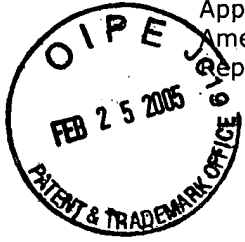
Signature: Lawrence E. Ashery Registration No. Attorney/Agent: 34,515 Telephone: (610) 407-0700  
 Name (Print/Type): Lawrence E. Ashery Date: February 23, 2005

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Application No.: 09/913,362  
Amendment Dated: February 23, 2005  
Reply to Office Action of: November 30, 2004

MAT-8172US



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Appln. No: 09/913,362  
Applicant: Yasunori MATSUKAWA, et al.  
Filed: May 1, 2002  
Title: NON-CONTACT MAGNETIC POSITION SENSOR  
TC/A.U.: 2862  
Examiner: Jay M. Patidar  
Confirmation No.: 9677  
Docket No.: MAT-8172US

**AMENDMENT**

***Mail Stop Amendment***

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Responsive to the Office Action dated **November 30, 2004**, please amend the above-identified application as follows:

- Amendments to the Specification** begin on page \_\_\_\_\_ of this paper.
- Amendments to the Claims** are reflected in the listing of claims which begins on page **2** of this paper.
- Amendments to the Drawings** begin on page \_\_\_\_\_ of this paper and include an attached replacement sheet(s).
- Amendments to the Abstract** are on page \_\_\_\_\_ of this paper. A clean version of the Abstract is on page \_\_\_\_\_ of this paper.
- Remarks/Arguments** begin on page **9** of this paper.

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